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22850 7590 05/19/2010

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(Depositor's name) (Supratere) (Date)

			(organiza)			
				(Date)		
APPLICATION NO	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.		
10/767.282	01/30/2004	Takefumi Yamada	248308US90	4283		

TITLE OF INVENTION: MULTIPLE-OUTPUT MULTIPLE-INPUT (MIMO) COMMUNICATION SYSTEM, MIMO RECEIVER AND MIMO RECEIVED AND MIMO

Г	APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL PEE(S) DUE	DATE DUE	
	nonprovisional	NO	\$1510	\$300	\$0	\$1810	08/19/2010	
Г	EXAMINER		ART UNIT	CLASS-SUBCLASS]			
	AGHDAM, F	RESHTEH N	2611	375-267000	-			
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1361). ☐ Change of correspondence address (or Change of Correspondence Address form F1705/B1/22) attached. ☐ "Fee Address" indication or "Fee Address" Indication form F105/B1/2; Rev 03 02 or more recent) attached. Use of a Customer Number is required.				2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agento SR, alternatively. (2) the name of a single firm thaving as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.		era 2 McClell	Oblon, Spivak. McClelland, Maier Neustadt, L.L.P.	
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)								

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patient. If an assignee is identified below, the document has been filled for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filling an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: CITY and STATE OR COUNTRY)

NTT DoCoMo, Inc.

Tokyo, JAPAN

Please check the appropriate assignee category or categories (will no	t be printed on the patent): 🔲 Individual 🔯 Corporation or other private group entity 🖵 Government				
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Date AUG 1 3 2010
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